

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

In re:	§	Case No. 15-29676
	§	
PAMELA D. NEMO	§	
	§	
	§	
Debtor(s)	§	

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**CHAPTER 7 TRUSTEE'S FINAL ACCOUNT AND DISTRIBUTION REPORT  
CERTIFICATION THAT THE ESTATE HAS BEEN FULLY ADMINISTERED  
AND APPLICATION TO BE DISCHARGED (TDR)**

David P. Leibowitz, chapter 7 trustee, submits this Final Account, Certification that the Estate has been Fully Administered and Application to be Discharged.

1) All funds on hand have been distributed in accordance with the Trustee's Final Report and, if applicable, any order of the Court modifying the Final Report. The case is fully administered and all assets and funds which have come under the trustee's control in this case have been properly accounted for as provided by law. The trustee hereby requests to be discharged from further duties as a trustee.

2) A summary of assets abandoned, assets exempt, total distributions to claimants, claims discharged without payment, and expenses of administration is provided below:

Assets Abandoned: <i>(without deducting any secured claims)</i>	\$9,600.00	Assets Exempt:	\$7,096.08
Total Distributions to Claimants:	\$1,854.90	Claims Discharged Without Payment:	\$84,459.72
Total Expenses of Administration:	\$675.02		

3) Total gross receipts of \$3,776.00 (see **Exhibit 1**), minus funds paid to the debtor(s) and third parties of \$1,246.08 (see **Exhibit 2**), yielded net receipts of \$2,529.92 from the liquidation of the property of the estate, which was distributed as follows:

	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
Secured Claims (from <b>Exhibit 3</b> )	\$18,145.00	\$0.00	\$0.00	\$0.00
Priority Claims:				
Chapter 7 Admin. Fees and Charges (from <b>Exhibit 4</b> )	NA	\$675.02	\$675.02	\$675.02
Prior Chapter Admin. Fees and Charges (from <b>Exhibit 5</b> )	NA	\$0.00	\$0.00	\$0.00
Priority Unsecured Claims (From <b>Exhibit 6</b> )	\$0.00	\$0.00	\$0.00	\$0.00
General Unsecured Claims (from <b>Exhibit 7</b> )	\$90,353.57	\$54,509.05	\$54,509.05	\$1,854.90
<b>Total Disbursements</b>	\$108,498.57	\$55,184.07	\$55,184.07	\$2,529.92

4). This case was originally filed under chapter 7 on 08/31/2015. The case was pending for 20 months.

5). All estate bank statements, deposit slips, and canceled checks have been submitted to the United States Trustee.

6). An individual estate property record and report showing the final accounting of the assets of the estate is attached as **Exhibit 8**. The cash receipts and disbursements records for each estate bank account, showing the final accounting of the receipts and disbursements of estate funds is attached as **Exhibit 9**.

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Dated: 04/12/2017

By: /s/ David P. Leibowitz  
Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

**EXHIBITS TO  
FINAL ACCOUNT**

**EXHIBIT 1 – GROSS RECEIPTS**

DESCRIPTION	UNIFORM TRAN. CODE	AMOUNT RECEIVED
Unscheduled 2015 Income tax refund	1224-000	\$3,776.00
<b>TOTAL GROSS RECEIPTS</b>		<b>\$3,776.00</b>

The Uniform Transaction Code is an accounting code assigned by the trustee for statistical reporting purposes.

**EXHIBIT 2 – FUNDS PAID TO DEBTOR & THIRD PARTIES**

PAYEE	DESCRIPTION	UNIFORM TRAN. CODE	AMOUNT PAID
PAMELA NEMO	Funds to Third Parties	8500-002	\$1,246.08
<b>TOTAL FUNDS PAID TO DEBTOR AND THIRD PARTIES</b>			<b>\$1,246.08</b>

**EXHIBIT 3 – SECURED CLAIMS**

NONE

**EXHIBIT 4 – CHAPTER 7 ADMINISTRATIVE FEES and CHARGES**

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
David P. Leibowitz, Trustee	2100-000	NA	\$632.48	\$632.48	\$632.48
David P. Leibowitz, Trustee	2200-000	NA	\$21.44	\$21.44	\$21.44
Green Bank	2600-000	NA	\$21.10	\$21.10	\$21.10
<b>TOTAL CHAPTER 7 ADMIN. FEES AND CHARGES</b>		NA	<b>\$675.02</b>	<b>\$675.02</b>	<b>\$675.02</b>

**EXHIBIT 5 – PRIOR CHAPTER ADMINISTRATIVE FEES and CHARGES**

NONE

**EXHIBIT 6 – PRIORITY UNSECURED CLAIMS**

NONE

**EXHIBIT 7 – GENERAL UNSECURED CLAIMS**

CLAIM NUMBER	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
1	Goal Financial	7100-000	\$38,568.00	\$40,062.59	\$40,062.59	\$1,363.30
2	Midland Funding	7100-000	\$1,835.00	\$1,834.86	\$1,834.86	\$62.44

LLC						
3-2	Capital One Auto Finance	7100-000	\$18,145.00	\$12,611.60	\$12,611.60	\$429.16
	AAA Community Finance	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	Acme Physician Services	7100-000	\$152.00	\$0.00	\$0.00	\$0.00
	Acme Physician Services	7100-000	\$79.00	\$0.00	\$0.00	\$0.00
	Acme Contl Credit Unio	7100-000	\$1,492.00	\$0.00	\$0.00	\$0.00
	Acme Contl Credit Unio	7100-000	\$441.00	\$0.00	\$0.00	\$0.00
	Acme Contl Credit Unio	7100-000	\$231.00	\$0.00	\$0.00	\$0.00
	Acme Contl Credit Unio	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	ACME Financial	7100-000	\$3,032.00	\$0.00	\$0.00	\$0.00
	Advocate Christ Medical Center	7100-000	\$865.40	\$0.00	\$0.00	\$0.00
	Advocate Christ Medical Center	7100-000	\$1,885.00	\$0.00	\$0.00	\$0.00
	Advocate Medical Group	7100-000	\$21.37	\$0.00	\$0.00	\$0.00
	Americash Loans	7100-000	\$1,000.00	\$0.00	\$0.00	\$0.00
	Chase Auto	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	CHASE BANK USA	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	City of Chicago	7100-000	\$444.00	\$0.00	\$0.00	\$0.00
	City of Markham	7100-000	\$200.00	\$0.00	\$0.00	\$0.00
	City of Markham	7100-000	\$100.00	\$0.00	\$0.00	\$0.00
	COMCAST	7100-000	\$239.00	\$0.00	\$0.00	\$0.00
	COMED	7100-000	\$2,765.00	\$0.00	\$0.00	\$0.00
	ComEd	7100-000	\$1,151.45	\$0.00	\$0.00	\$0.00
	COMED	7100-000	\$2,022.00	\$0.00	\$0.00	\$0.00
	Credit Box	7100-000	\$1,000.00	\$0.00	\$0.00	\$0.00
	Fifth Third Bank	7100-000	\$647.00	\$0.00	\$0.00	\$0.00
	FIRST MIDWEST BANK	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	General Dentistry	7100-000	\$19.80	\$0.00	\$0.00	\$0.00
	Glelsi/Goal Financial	7100-000	\$1.00	\$0.00	\$0.00	\$0.00
	Glover Law Office	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	Gofin/glelsi	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
	Guaranty Bank	7100-000	\$388.87	\$0.00	\$0.00	\$0.00

Illinois Tollway Authority	7100-000	\$2,574.00	\$0.00	\$0.00	\$0.00
Illinois Tollway Authority	7100-000	\$642.00	\$0.00	\$0.00	\$0.00
Illinois Tollway Authority	7100-000	\$214.00	\$0.00	\$0.00	\$0.00
Liberty Mutual	7100-000	\$364.30	\$0.00	\$0.00	\$0.00
Mark S. Reiter MD SC	7100-000	\$55.00	\$0.00	\$0.00	\$0.00
MED1 02 Quest Diagnostics Incorporat	7100-000	\$53.00	\$0.00	\$0.00	\$0.00
MFJT	7100-000	\$2,600.00	\$0.00	\$0.00	\$0.00
Oak Lawn Immediate Care	7100-000	\$12.27	\$0.00	\$0.00	\$0.00
Opportunity Financial	7100-000	\$1,900.00	\$0.00	\$0.00	\$0.00
Plain Green LLC	7100-000	\$916.36	\$0.00	\$0.00	\$0.00
Quest Diagnostics	7100-000	\$18.16	\$0.00	\$0.00	\$0.00
Slm Financial Corp	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
Somerset Park Apartments	7100-000	\$2,587.05	\$0.00	\$0.00	\$0.00
South Suburban Dental Center	7100-000	\$309.54	\$0.00	\$0.00	\$0.00
T. Sivarajan, M.D.	7100-000	\$225.00	\$0.00	\$0.00	\$0.00
US Dep Ed	7100-000	\$0.00	\$0.00	\$0.00	\$0.00
Village of Alsip	7100-000	\$371.00	\$0.00	\$0.00	\$0.00
Village of Alsip	7100-000	\$337.00	\$0.00	\$0.00	\$0.00
Village of Alsip	7100-000	\$250.00	\$0.00	\$0.00	\$0.00
Village of Calumet Park	7100-000	\$200.00	\$0.00	\$0.00	\$0.00
<b>TOTAL GENERAL UNSECURED CLAIMS</b>		\$90,353.57	\$54,509.05	\$54,509.05	\$1,854.90

## ASSET CASES

Case No.: 15-29676  
Case Name: NEMO, PAMELA D.  
For the Period Ending: 4/12/2017

Trustee Name: David Leibowitz  
Date Filed (f) or Converted (c): 08/31/2015 (f)  
§341(a) Meeting Date: 10/19/2015  
Claims Bar Date: 06/28/2016

1	2	3	4	5	6
Asset Description (Scheduled and Unscheduled (u) Property)	Petition/ Unscheduled Value	Estimated Net Value (Value Determined by Trustee, Less Liens, Exemptions, and Other Costs)	Property Abandoned OA =§ 554(a) abandon.	Sales/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
<b>Ref. #</b>					
1	Bank of America	\$350.00	\$0.00	\$0.00	FA
2	security deposit	\$800.00	\$0.00	\$0.00	FA
3	furniture	\$800.00	\$0.00	\$0.00	FA
4	wearing apparel	\$700.00	\$0.00	\$0.00	FA
5	401(k)	\$800.00	\$0.00	\$0.00	FA
6	2010 Nissan Rogue	\$12,000.00	\$0.00	\$0.00	FA
7	Unscheduled 2015 Income tax refund (u)	\$0.00	\$2,529.92	\$3,776.00	FA
<b>Asset Notes:</b> Debtor's pro-rated portion of 2015 tax refund is \$1,246.08.					

## TOTALS (Excluding unknown value)

\$15,450.00

\$2,529.92

\$3,776.00

## Gross Value of Remaining Assets

\$0.00

## Major Activities affecting case closing:

06/30/2016 2016 Reporting Period:  
Asset Case - intercepted 2015 tax refund  
Claims bar date: 6/28/16

The Trustee will object to claim 3 as the Trustee is not administering the asset, claim is secured by Debtor's vehicle.

Once claim objection addressed, case ready for TFR.

No need to object - creditor amended claim 3-2 to reflect deficiency after sale of collateral 9/9/2016

Initial Projected Date Of Final Report (TFR): 01/31/2017

Current Projected Date Of Final Report (TFR): 01/31/2017

/s/ DAVID LEIBOWITZ

DAVID LEIBOWITZ

## CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. 15-29676  
Case Name: NEMO, PAMELA D.  
Primary Taxpayer ID #: \*\*\_\*\*\*1711  
Co-Debtor Taxpayer ID #:  
For Period Beginning: 8/31/2015  
For Period Ending: 4/12/2017

Trustee Name: David Leibowitz  
Bank Name: Green Bank  
Checking Acct #: \*\*\*\*\*7601  
Account Title: Nemo, Pamela  
Blanket bond (per case limit): \$5,000,000.00  
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
03/24/2016		United States Treasury	Unscheduled 2015 Income Tax Refund	*	\$3,776.00		\$3,776.00
	{7}		Estate's share \$2,529.92	1224-000			\$3,776.00
	{7}		Debtor's Share \$1,246.08	1224-002			\$3,776.00
03/30/2016	3001	PAMELA NEMO	Non Estate portion of Income Tax Refund	8500-002		\$1,246.08	\$2,529.92
03/31/2016		Green Bank	Bank Service Fee	2600-000		\$0.78	\$2,529.14
04/29/2016		Green Bank	Bank Service Fee	2600-000		\$4.34	\$2,524.80
05/31/2016		Green Bank	Bank Service Fee	2600-000		\$3.94	\$2,520.86
06/30/2016		Green Bank	Bank Service Fee	2600-000		\$3.93	\$2,516.93
07/29/2016		Green Bank	Bank Service Fee	2600-000		\$4.06	\$2,512.87
08/31/2016		Green Bank	Bank Service Fee	2600-000		\$4.05	\$2,508.82
03/01/2017	3002	David P. Leibowitz	Trustee Compensation	2100-000		\$632.48	\$1,876.34
03/01/2017	3003	David P. Leibowitz	Trustee Expenses	2200-000		\$21.44	\$1,854.90
03/01/2017	3004	Goal Financial	Claim #: 1; Amount Claimed: 40,062.59; Distribution Dividend: 3.40;	7100-000		\$1,363.30	\$491.60
03/01/2017	3005	Midland Funding LLC	Claim #: 2; Amount Claimed: 1,834.86; Distribution Dividend: 3.40;	7100-000		\$62.44	\$429.16
03/01/2017	3006	Capital One Auto Finance	Claim #: 3; Amount Claimed: 12,611.60; Distribution Dividend: 3.40;	7100-000		\$429.16	\$0.00

SUBTOTALS

\$3,776.00

\$3,776.00

**FORM 2**  
**CASH RECEIPTS AND DISBURSEMENTS RECORD**

Case No. 15-29676  
Case Name: NEMO, PAMELA D.  
Primary Taxpayer ID #: \*\*\_\*\*\*1711  
Co-Debtor Taxpayer ID #:  
For Period Beginning: 8/31/2015  
For Period Ending: 4/12/2017

Trustee Name: David Leibowitz  
Bank Name: Green Bank  
Checking Acct #: \*\*\*\*\*7601  
Account Title: Nemo, Pamela  
Blanket bond (per case limit): \$5,000,000.00  
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

<b>TOTALS:</b>	\$3,776.00	\$3,776.00	\$0.00
Less: Bank transfers/CDs	\$0.00	\$0.00	
<b>Subtotal</b>	\$3,776.00	\$3,776.00	
Less: Payments to debtors	\$0.00	\$0.00	
<b>Net</b>	\$3,776.00	\$3,776.00	

**For the period of 8/31/2015 to 4/12/2017**

Total Compensable Receipts:	\$2,529.92
Total Non-Compensable Receipts:	\$1,246.08
Total Comp/Non Comp Receipts:	\$3,776.00
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$2,529.92
Total Non-Compensable Disbursements:	\$1,246.08
Total Comp/Non Comp Disbursements:	\$3,776.00
Total Internal/Transfer Disbursements:	\$0.00

**For the entire history of the account between 03/24/2016 to 4/12/2017**

Total Compensable Receipts:	\$2,529.92
Total Non-Compensable Receipts:	\$1,246.08
Total Comp/Non Comp Receipts:	\$3,776.00
Total Internal/Transfer Receipts:	\$0.00

Total Compensable Disbursements:	\$2,529.92
Total Non-Compensable Disbursements:	\$1,246.08
Total Comp/Non Comp Disbursements:	\$3,776.00
Total Internal/Transfer Disbursements:	\$0.00



**FORM 2**  
**CASH RECEIPTS AND DISBURSEMENTS RECORD**

Case No. 15-29676  
Case Name: NEMO, PAMELA D.  
Primary Taxpayer ID #: \*\*\_\*\*\*1711  
Co-Debtor Taxpayer ID #:  
For Period Beginning: 8/31/2015  
For Period Ending: 4/12/2017

Trustee Name: David Leibowitz  
Bank Name: Green Bank  
Checking Acct #: \*\*\*\*\*7601  
Account Title: Nemo, Pamela  
Blanket bond (per case limit): \$5,000,000.00  
Separate bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

TOTAL - ALL ACCOUNTS

NET DEPOSITS

NET  
DISBURSEACCOUNT  
BALANCES

\$3,776.00

\$3,776.00

\$0.00

**For the period of 8/31/2015 to 4/12/2017**

Total Compensable Receipts: \$2,529.92  
Total Non-Compensable Receipts: \$1,246.08  
Total Comp/Non Comp Receipts: \$3,776.00  
Total Internal/Transfer Receipts: \$0.00

Total Compensable Disbursements: \$2,529.92  
Total Non-Compensable Disbursements: \$1,246.08  
Total Comp/Non Comp Disbursements: \$3,776.00  
Total Internal/Transfer Disbursements: \$0.00

**For the entire history of the case between 08/31/2015 to 4/12/2017**

Total Compensable Receipts: \$2,529.92  
Total Non-Compensable Receipts: \$1,246.08  
Total Comp/Non Comp Receipts: \$3,776.00  
Total Internal/Transfer Receipts: \$0.00

Total Compensable Disbursements: \$2,529.92  
Total Non-Compensable Disbursements: \$1,246.08  
Total Comp/Non Comp Disbursements: \$3,776.00  
Total Internal/Transfer Disbursements: \$0.00

/s/ DAVID LEIBOWITZ

DAVID LEIBOWITZ